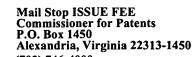


PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail



or <u>Fax</u> (70)

(703) 746-4000

INSTRUCTIONS: This for appropriate. All further continuous corrected maintenance fee notification	rm should be used for trans respondence including the F below or directed otherwise as.	smitting the ISSUE FEE and Patent, advance orders and not in Block I, by (a) specifying	PUBLIC tification a new co	ATION FEE (if requ of maintenance fees v orrespondence address	nired). Blocks I through 4 s will be mailed to the current c; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 30596 7590 04/21/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
P.O.BOX 8910 RESTON, VA 201	KEY & PIERCE, P.L 95	JUL 2 1 200		I hereby certify that the States Postal Service addressed to the Mai	rtificate of Mailing or Trans his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO, on the date indicated be	g deposited with the United st class mail in an envelope above, or being facsimile
		1	<u> </u>			(Depositor's name)
		PADEMARKOR	,			(Signature)
						(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/079,896	02/22/2002	Hubert De Steur			32860-000291/US	7394
TITLE OF INVENTION: M	IETHOD AND APPARATU	S FOR STRUCTURING PRIN	•	RCUIT BOARDS	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	<u> </u>	\$300	\$1630	07/21/2004
EXAMINER		ART UNIT	CI	ASS-SUBCLASS	ו	
ALANKO, ANITA KAREN		1765		216-013000	j	
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicati PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN SIEMENS AK	on (or "Fee Address" Indicate or more recent) attached. Use D RESIDENCE DATA TO BE an assignee is identified bely do to the USPTO or is being sEE TIENGESELLSCHAF e assignee category or category enclosed:	names of agents O firm (havagent) an attorneys will be proposed by the propose	f up to R, alternaring as a did the nau or agent inted. T (print of ear on the Completi CE: (CIT), GERI patent); F Fee(s): in the amount of the completion of the completi	patent. Inclusion of a ion of this form is NO Y and STATE OR CO MANY individual ount of the fee(s) is end	of a single attorney or 2 tered patent d, no name 3 ssignee data is only appropriate a substitute for filing an ass UNTRY)	Soup entity government Hiciency Fees
(Authorized Signature) Donald J. Day NOTE; The Issue Fee and other than the applicant; interest as shown by the restriction. Confidentiality estimated to take 12 minus completed application for case. Any comments on suggestions for reducing the Patent and Trademark 22313-1450. DO NOT S	dey, Reg. No. 3 d Publication Fee (if require a registered attorney or age cords of the United States Pa attorney or age to by 37 CFR by the public which is to fi by the public which is to fi by the governed by 35 U.S. C.	(Date) (Date)	anyone party in uired to cess) an	07/22/2004 M 07/22/2004 M 01 FC:1501 02 FC:1504	IAHMED2 00000038 1007	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.